

JAN 18 2007

PTO/SB/22 (08-03)

Approved for use through 7/31/2006. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) UTAU:1063RCE
-------------------------------------------------------------	----------------------------------------------

In re Application of **Schmidt, et al.**Application Number **10/672,689**Filed **Sept. 26, 2003**For **Cell-Free Tissue Replacement For Tissue Engineering**Art Unit **1651**Examiner **Allison M. Ford**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|--------------------------------------------------------------------|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120.00 |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ 450.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | .00 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | .00 |

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: **\$225.00**.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number **53,598**.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

January 18, 2007

Date

(214) 866-0001

Telephone Number



Signature

Chainey P. Singleton

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

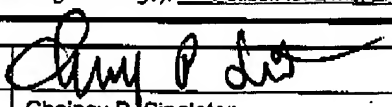
☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (01-05)
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FEE TRANSMITTAL For FY 2006		Complete if Known		
		Application Number	10/672,689	
		Filing Date	09/26/2003 RECEIVED	
		First Named Inventor	Schmidt, et al. CENTRAL FAX CENTER	
		Examiner Name	Ford, Allison M.	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1651 JAN 18 2007	
TOTAL AMOUNT OF PAYMENT (\$) 225.00		Attorney Docket No.	UTAU:1063RCE	
METHOD OF PAYMENT (check all that apply)				
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input type="checkbox"/> Deposit Account Deposit Account Number: _____ Deposit Account Name: _____ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input type="checkbox"/> Charge any additional fee(s) or underpayments <input type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES				
	FILING FEES		SEARCH FEES	EXAMINATION FEES
	<u>Small Entity</u>		<u>Small Entity</u>	<u>Small Entity</u>
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	150	500	200
Design	200	100	100	130
Plant	200	100	300	160
Reissue	300	150	500	600
Provisional	200	100	0	0
2. EXCESS CLAIM FEES				Small Entity
Fee Description				Fee (\$)
Each claim over 20 (including Reissues)				50
Each independent claim over 3 (including Reissues)				200
Multiple dependent claims				360
Total Claims				Fee (\$)
Extra Claims				Fee Paid (\$)
- 20 or HP = _____ X 25.00 = _____				
HP = highest number of total claims paid for, if greater than 20.				
Indep. Claims				Multiple Dependent Claims
Extra Claims				Fee (\$)
Fee Paid (\$)				Fee (\$)
- 20 or HP = _____ X 100.00 = _____				
HP = highest number of total claims paid for, if greater than 20.				
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____	_____	_____ / 50 (round up to a whole number) x _____		
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): _____ Petition for 2 mo. Extension of Time _____				Fees Paid (\$)
				225.00
SUBMITTED BY				
Signature 		Registration No. (Attorney/Agent) 53,598	Telephone: 214-866-0001	
Name (Print/Type) Chainey P. Singleton		Date: January 18, 2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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